

PERSONALITY PROBLEMS OF THE

ADULT BLIND

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The following lines are written in the hope that those who read may derive a better understanding of the real difficulties that confront the adult who must live life without the advantages of sight, and that through such an understanding they may avoid any action which might add to the obstacles confronting blind persons as individuals as a group.

There are so many kinds of blindness and individual differences of attitude, emotional stability or instability and philosophy of life are so great that it is first necessary to limit the scope of our subject matter. The last official count made by the representative of the Utah Commission for the Blind listed slightly more than 1,112 blind persons in our state. Of these, approximately 60 per cent are over the age of 50 years, and 14 per cent are under 21, leaving about 26 per cent within the ages of productivity. However, about 25 per cent of the total 1,112 have other physical disabilities such as rheumatism, crippledness, diseases, or extreme age which render them incapable of anything but the most meager physical activity and which constitutes a more complex personality problem. The many causes of blindness such as heredity, social disease, alcoholism, or accident, often complicate the personality problem. If sight gradually fails, giving a period of several months or years of opportunity for adjustment, the problem differs from the case where sight is suddenly destroyed by some accident. The various degrees of blindness ranging from such impaired vision as makes reading difficult through degrees of light perception to total blindness, each have their special problems. Hence, it is apparent from the start that we cannot, for the purposes of this paper, consider personality problems of the individual blind person. We must limit our discussion to such general problems as are common to

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many, or most blind adults, and which owe their origin to that physical disability.

If we accept a psychological definition of personality as the dynamic organization within the individual of those psychophysiological systems, which determine his unique adjustment to environment, we see that the first serious problem that confronts the adult who loses his sight is an actual change in structural-functional phase of his personality. Physically he is not the complete, unified organism he formerly was. With loss of sight there was a loss of the chief means of mental and muscular coordination, as well as the main avenue of most vivid perceptions. Moreover, there is a severe upset of whatever balance or integration had been achieved between situations and techniques of meeting them. All this generally leaves the newly blinded adult in a state of serious disorganization and confusion.

With most operations or tasks which the average adult performs, sight is the chief means of motor-coordination as well as of orientation, and without it he is compelled to learn new techniques, skills and methods for performing any of the functions he once did. If he attempts any overt activity, manipulations or locomotion, he must orient himself entirely by means of auditory, kinesthetic or cutaneous stimuli. It is only natural that judgments of distance, space and direction made on the basis of these indefinite, little used and inaccurately interpreted cues, should be faulty with consequent clumsy and faltering movements when the newly blinded adult tries to walk about or use his hands in the performance of any task.

The wholesome and mentally healthful way of meeting this maladjustment in the structure-functional phase of the personality would be: first, to face the reality of the condition and accept it; then, to deliberately set about learning new skills, habits and techniques for satisfying old

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desires. While there is no great harm in passively hoping that some day, some way, a cure may be found for the particular cause of blindness, too often newly blinded adults, for various reasons, refuse to accept the verdict of best available medical knowledge and dash frantically from specialist to specialist to abandon science and take up patented medicines or spiritualistic cures. Before any adjustment can be attempted, there must be, on the part of the individual concerned, an acceptance, an admission that blindness exists, even though the belief and hope may be that it is temporary. When this is done, the individual can set about to reorganize his personality which, for awhile, seemed reduced to such a hopeless state of chaos. This usually involves the changing of some attitudes, the acknowledgment of limitations and, starting with simple operations, the learning to do without sight, many things formerly done.

Thus, far, we have considered only the individual and his adjustment to the physical condition of blindness, but there is reason to believe that this is much simpler than his adjustment to the emotional complications arising out of the loss of his sight. Laboratory experiments tend to show that other animals rendered physically defective in one way or another quickly adjust to their limitations when emotions do not complicate the adaptation. Rattle snakes with their fangs removed by operation, promptly change their mode of attack from a striking, pecking movement of the head, to a grasping between the jaws and tugging with jerking from side to side. Pheasants, with the pinion bones of the wings removed quickly abandon flight as a means of locomotion and develop speed in running. Similarly, many newly blinded persons, unprompted to emotional indulgences by family or friends, find interest and pleasure of accomplishment in shaving, dressing, getting about the yard or performing other tasks for the first time without sight.

But, alas, we humans do have emotions and preconceived notions

and prejudices and attitudes, and they all make up part of our personalities. Hence, the person who grows to adulthood without any physical or mental abnormalities usually has been taught to appreciate all his faculties, organs and capacities. In fact, in teaching him to appreciate and take care of his eyesight, society has often tried to make him fear blindness. Christianity, history, literature and tradition have all collaborated to depict for him the pitiful spectacle of the traditional blindman. It is not an introspection of the writer's that causes him to make this assertion. Abundant experiences bears out this claim. Not once, but many times have I heard physically normal and presumably mentally well balanced people say, "I'd rather be dead than have to live a life of blindness." Less than a month prior to the present writing, a past president of a large western college committed suicide because he believed blindness inevitable and preferred death to it.

Such preconceived notions and emotional attitudes about blindness on the part of the individual seriously jeopardize his chances for a prompt, wholesome adjustment. But the situation is further aggravated by similar notions and attitudes on the part of relatives and friends who usually lavish the blinded person with such pity and emotional outbursts as serve further to keep him in a state of depression.

Moreover, these notions and attitudes motivate relatives and friends to other actions that have further unfavorable influences upon the person under consideration. When he does attempt to regain his emotional balance and attempts to learn to do things for himself, he is too often hampered by over-solicitous members of the family. They insist upon waiting upon him and prevailing upon him to not attempt the performance of tasks. They constantly caution him to "Be Careful," and entreat him, to, "Let me do that," all of which constitutes a most unhealthful oversheltering. It would be far better for his mental

health to encourage him in the learning of as many new skills, habits and techniques as possible. To bump into doorways or furniture while learning to walk about in his home does far less injury to his physical health than the failure to try does to his mental health.

Another factor of the emotional phase of personality problems growing out of blindness is called to our attention by Dr. Holsopple, chief clinical psychologist of the New York State Mental Hospital, who says that the newly blinded adult responds emotionally to many things to which he did not formerly respond emotionally, and he also responds with greater emotional intensity to things which always did invoke some emotional response. The writer does not know upon what evidence Mr. Holsopple bases this statement, but it certainly is not contrary to his own experience. And if this be true, it suggests a need for greater ability to inhibit emotional impulses or to sublimate them. It most certainly is true that the blind person finds his efforts more often hampered and frustrated because of his lack of vision than does the sighted person. As he goes about his house, furniture scattered promiscuously blocks his way, he bumps his shins, stumbles and creates a commotion. Often times he is hampered in the performance of a simple operation by the inability to get, by touch, a clear and accurate perception of the units, parts or pieces with which he is working. The futility of responding emotionally to such situations eventually teaches most blind persons to develop the trait of patience. In other instances, as riding in an automobile, certainly fear is often aroused when it would not be ordinarily, or it is aroused more intensely than it would otherwise be, because of the inability to see all the external factors involved when the driver suddenly applies the brakes. This suggests another need, an outlet for these emotional energies thus aroused.

Another mentally unhealthful thing which blindness tends to foster and which constitutes a problem to which the personality must adjust is a tendency towards excessive introspection. When not engaged in some overt activity or consciously directed mental activity, the ordinary person with sight passes the time reading the newspaper, glancing at magazines, gazing at the landscape or some other such perceptual behavior. As one writer puts it, "Sighted people perceive much but think little." But what is there for the blind person to do during periods of monotonous inactivity or boredom? If he is not weary enough or if propriety does not permit that he go to sleep, he must either occupy his mind with some barren tactual perceptions or with some sort of mental activity. And too often this takes the form of excessive fantasy building or other equally unwholesome indulgences. Coupling this with what has already been said, we see additional reasons why oversheltering and discouragement of activity is unhealthful. Yet, a tendency toward inactivity and to just sit and think or dream, or whatever they do, is so common among many blind adults that it is almost a distinguishing characteristic with them. Furthermore, much of the activity expected of blind people by society and much other activity prescribed by home teachers, though it has other values, requires them to sit. Much activity recommended for blind adults is close, fine work with small articles and parts such as fancy needle work, basketry, leather work and the like. Such fine work tends to heighten nervousness rather than provide an outlet for nervous energy. A better kind of activity or work to prescribe for blind persons would be that which requires the individual to move and use more parts of the body, even to walk about within a reasonable range and where orientation as to direction and distance would be easy. Ordinary household tasks, moping floors, washing dishes, feeding livestock, vacuuming rugs and the like, would be very good because they not only provide an outlet for nervous and

emotional energies and attract the interest away from excessive introspection, but their performance carries a reward in itself.

With loss of sight usually comes a loss of membership in many of the groups to which the individual formerly belonged and a loss or change of status in all other groups to which he belonged. One psychologist says that only an individual with an exceptionally strong will could continue to attend functions of his lodge, club, church or other fraternal organizations after his loss of sight. Certainly the effect upon personality and the problem it gives rise to are apparent. But even more important is the effect of the individuals change of status in that group we call "The public." When the newly blinded person goes out on the street, he is still a member of the public group that crowds our sidewalks, but what a change in his status. Where he once went about his business unnoticed, now he is a spectacle. Mothers caution their children, "Be careful, look out! He's a blind man." Grown-ups stare at him much to the consternation and embarrassment of his guide. He is different, he is conspicuously different and he feels it. Even in the most primary of all groups, the family, he may retain his membership, but his status has vastly changed. If he was the head of the family, what prestige he has lost--if the homemaker--what influence--if any member, what independence? It is normal to desire to be a member of various groups and to be reinstated in some of these, and to have that unavoidable change of status minimized as much as possible would be the greatest kindness and most mentally healthful thing one could do for a blind person as regards this particular personality problem of blindness.

For one group of blind adults, the most serious personality problem arises not directly from the physical condition itself but

rather indirectly out of the socioeconomic condition into which he is thrown because of his blindness. It will be remembered from figures given at the first of this article, that about 26 per cent of the blind people of this state are between the ages of 21 and 50. While some of these are otherwise physically incapacitated for productive work, the majority of them are capable of earning a living if given the chance. From what has been said, it can be seen that it is possible to overcome most of the personality problems caused by blindness. Furthermore, it is possible in this age of specialization of labor, to develop certain skills and to learn to do, without sight, certain occupational and professional activities well enough to justify monetary reimbursement. In fact, it is possible for one without sight who possesses other qualifications to develop such skill in various occupational fields as to make his work fit for competition with some sighted workers. This, many of these younger blind adults have done. Yet, for many reasons, they are unable to find gainful employment. One thing the depression has taught us is the derogatory effect unemployment can have on the personality of an individual capable and willing to work. This detrimental effect of unemployment is only intensified when the individual has prepared himself at great sacrifice and cost of money and energy. Without being given a chance to prove whether or not he can do the work, and regardless of his training, the blind person is often buffeted and rebuffed from pillar to post by prospective employers who loudly proclaim their sympathy for him, but admit that their skepticism of the abilities of one without sight is so great they dare not give him a chance. He never loses a job because he never gets one. He could get a job if he could prove that he could do the work, but he can't prove that he can do the work because he cannot get a job by which to prove it. He sees his sighted friends getting positions and going up

while he slips backward. He never tastes economic independence or security. Without further elaboration, it is apparent that though he may overcome blindness and make a good adjustment to it an wholesome compensations for it, this last of problems that confront his personality and the one about which he often can do little or nothing, may rise up to destroy all the good work of his lifetime. His only hope is that somewhere, before he is crushed, he may find some person broad-minded enough and in a position to disregard his blindness and give him a chance to prove his ability.

An attempt has here been made to point out some of the most important personality problems which confront most blind adults and which owe their origin to the loss or lack of physical vision. It must not be thought that every blind individual is confronted with all these problems or that these are the only difficulties with which any blind person is confronted. As is true with all people, each individual has his unique set of personality problems.

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